Approved for use through 1/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/544,198		Filing Date 08/02/2005		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	г	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	(4)	
	SEARCH FEE (37 CFR 1 16(k), (i),		N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E	N/A		N/A		N/A		1	N/A		
	CFR 1.16(i)		minus 20 =		•		x \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *				x \$ =			X 8 =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50	gs exceed 100 on size fee due for each on thereof. See CFR 1.16(s).								
	MULTIPLE DEPEN	7 CFR 1.16(j))	•			1						
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	07/29/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 9	Minus	20	= 0	1	x s =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	3	- 0	1	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
ENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.150))		Minus		-	1	X \$ =		OR	x s =		
	Independent (37 CFR 1 16(h))		Minus	***	-	1	X \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))					l			OR			
* 1*									OR	TOTAL ADD'L FEE		
"If the entry in column 1 is less than the entry in column 2, wite 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Perviously Paid For M THIS SPACE is less than 3, enter "20". "If the "Highest Number Perviously Paid For M THIS SPACE is less than 3, enter "3". "If the "Highest Number Perviously Paid For M THIS SPACE is less than 3, enter "3". The "Highest Number Perviously Paid For M THIS SPACE is less than 5, enter "3". The "Highest Number Perviously Paid For M THIS SPACE is less than 5, enter "3".												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, process an application. Conhoematily is governed by St. U.S. V. 122/ind. 27 CH1 1.14. This collection is estimated to take 12 misstes to compute, including gathering exquire to complete the form and/or suggestions for reducing mile burden, should be sent to the Child information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.